U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

		S DCI VICC									
PLAINTIFF UNITED STATES OF AMERICA				FILED HOLERKS OFFICE				COURT CASE NUMBER CR-04-10288-RWZ			
DEFENDANT JOSEPH BALDASSANO					an SEP	15 P 3: 3	3	TYPE OF PROCI Preliminary C	ESS: Order of	Forfeiture	
									2	S	
CEDI/E											_
SERVE	Elliott M. Weinstein as Counsel for Joseph Baldassano										
ΑT	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)									EST.	
	83 Atlantic Avenue, Boston, MA 02110										
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:							Number of pr with this Form	ocess to be served n - 285	l: 0	RVIC	
Uı	ttorney				Number of pa	Number of parties to be served in this case		1.1			
Jo 1 (Bo	ourthouse				Check for ser	Check for service on U.S.A.					
SPECIAL INSTI	RUCTIONS OR O'ers, and Estimated	THER INFORM	ATION THA For Service)	T WILL A	ASSIST IN E	EXPEDITING SER	VICE (Include	Business and Alta	ernate A	ddress, All	
Please serve a receipt reques		ttached Prelin	ninary Ord	er of Fo	rfeiture up	oon the above-n	amed indiv	idual via certi	fied m	ail, return JLJ xt 32	297
Signature of Atto	service on be	ehalf of : PLAINTIFF DEFENDANT			ļ	TELEPHONE NUMBER (617) 748-3100		DATE August 30, 2006			
	SPACE BELO	OW FOR US	E OF U.S	MARS	HALON	LY - DO NOT	WRITE B	ELOW THIS	LINE	C	
I acknowledge rece number of process (Sign only first USA)	ess indicated. USM 285 if more than 25 38 M/L							Deputy or Clerk	_	Date 8/31/8	6
I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.											
☐ I hereby certify	and return that I an	n unable to locate th	ne individual, co	ompany, cor	rporation, etc.	, named above (See re	marks below).		-		-
Name and title of individual served (If not shown above).								A person of suitable age and discretion then residing in the defendant's usual place of abode.			
Address (complete only if different than shown above)								8 06	Time		am pm
							Signature of	of U.S. Marshal or	Deputy	· · · · ·	
Service Fee	Total Mileage Ch (including endeav		ing Fee	Total Cha	rges	Advance Deposits	Amount O			mount or Refund	
REMARKS: 8/31/06 Certified # 7006 0810 0001 5820 3911 912/06 Delivery Date 3											
91	2106	Deliver	y D	ale					(3		
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PRIOR EDITIONS MAY BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)